

1.) CORPORATION NAME: C.M. Patel & Sons, Inc.	DUE DATE: 4/30/2014				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: SHASHIKANT C RAY 5 COLLEGE AVENUE ONANCOCK, VA	SCC ID NO: 07084205				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: ACCOMACK COUNTY	5.) STOCK INFORMATION <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">CLASS</td> <td style="width:50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>1,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	1,000
CLASS	AUTHORIZED				
COMMON	1,000				
4.) STATE OR COUNTRY OF INCORPORATION: VA					

6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 5 COLLEGE AVENUE CITY/ST/ZIP: ONANCOCK, VA 23417	
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7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: HITESH PATEL TITLE: OFFICER ADDRESS: 5 COLLEGE AVENUE CITY/ST/ZIP/CO: ONANCOCK, VA 23417	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: SHASHIKANT C RAY TITLE: OFFICER ADDRESS: 5 COLLEGE AVENUE CITY/ST/ZIP/CO: ONANCOCK, VA 23417	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME: BHARAT PATEL TITLE: DIRECTOR ADDRESS: 5 COLLEGE AVENUE CITY/ST/ZIP/CO: ONANCOCK, VA 23417	<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ HITESH PATEL	HITESH PATEL, OFFICER	2/24/2014
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.